APR 2.1 2006 Water the Paperwork Reduction Action (9)

PTO/SB/30 (04-05)
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For Continued Examination (RCE) Transmittal

Address to: MS RCE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	10/620,612-Conf. #9666		
Filing Date	July 17, 2003		
First Named Inventor	Eric T. Stubbs		
Art Unit	2186		
Examiner Name	M. D. Anderson		
Attorney Docket Number	M4065.0322/P322-A		
Allottiey Docket Number	WHUUJ.UJZZ/FJZZ-M		

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).					
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.					
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on					
ii. Other					
b. x Enclose	d				
i. X Amendment/Reply iii. Information Disclosure Statement (IDS)					
ii. Affidavit(s)/Declaration(s) iv. Other					
2. Miscellaneous					
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a					
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)					
b. Other					
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.					
a. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No04-1073 I have enclosed a duplicate copy of this sheet.					
i. X RCE fee required under 37 CFR 1.17(e)					
iii Other					
b Check in the amount of \$ enclosed					
c. X Paymen	t by credit card (Form PTO-2038 enclosed)				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Signature	IL MA	Date	April 21	, 2006	
Name (Print/Type)	Gianni Minutoli	Registr	ation No.	41,198	

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PTO/SB/17 (01-06)
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Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/620,612-Conf. #9666 Application Number FEE TRANSMITTAL Filing Date July 17, 2003 For FY 2006 Eric T. Stubbs First Named Inventor Examiner Name M. D. Anderson Applicant claims small entity status. See 37 CFR 1.27 2186 Art Unit TOTAL AMOUNT OF PAYMENT M4065.0322/P322-A 790.00 Attomey Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of x | Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) Multiple Dependent Claims Fee (\$) - 24 = Fee (\$) Fee Paid (\$) HP = highest numer of total claims paid for, if greater than 20. **Extra Claims** Fee Paid (\$) Fee (\$) HP = highest numer of independent claims paid for, if greater than 3. If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ... 790.00 SUBMITTED BY Registration No. Signature 41,198 Telephone (202) 861-9191 (Attorney/Agent) Name (Print/Type) Gianni Minutoli April 21, 2006